



To: Prospective Applicants for the Automotive Dealership, Paint & Body Shop, Automotive Repair Facilities, Motorcycle Dealership and Recreational Vehicle Dealership General Permit

Attached is an **Automotive Dealership, Paint & Body Shop, Automotive Repair Facility, Motorcycle Dealership and Recreational Vehicle Dealership General Permit Notice of Intent (NOI) ARB-G** for a Louisiana Pollutant Discharge Elimination System (LPDES) permit, authorized under EPA's delegated NPDES program under the Clean Water Act. To be considered complete, every item on the form must be addressed and the last page signed by an authorized company agent. If an item does not apply, please enter "NA" (for not applicable) to show that the question was considered.

Two sets (one original and one copy) of your **completed NOI**, each with a marked **U.S.G.S. Quadrangle map** or equivalent attached, and the **site/flow diagrams** listed in Section III of the NOI, should be submitted to:

Mailing Address:

Department of Environmental Quality
Office of Environmental Services
Post Office Box 4313
Baton Rouge, LA 70821-4313
Attention: Water Permits Division

Physical Address (if NOI is hand delivered):

Department of Environmental Quality
Office of Environmental Services
602 N Fifth Street
Baton Rouge, LA 70802
Attention: Water Permits Division

If permit applicability requirements are met, and unless notified otherwise by the Secretary or his designee, owners/operators are authorized to discharge wastewater and/or stormwater under the terms and conditions of the permit upon the receipt of a hand-delivered or electronically submitted, properly completed NOI to the Office of Environmental Services, Water Permits Division or 48 hours after the postmarked date stamped on the envelope that contains the properly completed NOI. The permittee is required to keep a copy of the NOI submitted to the Water Permits Division at the permitted facility. It should be kept with other records related to the permit and permit compliance.

According to L. R. S. 48:385, any discharge to a state highway ditch, cross ditch, or right-of-way shall require approval from:

Louisiana DOTD
Right-Of-Way Permit
Office of Engineering
Post Office Box 94245
Baton Rouge, LA 70804-9245
(225) 379-1927

AND

Louisiana Department of Health
Office of Public Health
Environmental Health – Engineering Services
Post Office Box 4489
Baton Rouge, LA 70821-4489
(225) 342-7499

In addition, the plans and specifications for sanitary treatment plants must be approved by the Louisiana DHH, Office of Public Health at the address above.

A copy of the LPDES regulations may be obtained from the Department's website at <http://deq.louisiana.gov/page/rules-regulations> or from the Office of Environmental Assessment, Regulations Development Section, Post Office Box 4314, Baton Rouge, Louisiana 70821-4314, phone (225) 219-3550.

For questions regarding this NOI please contact the Water Permits Division at (225) 219-3590. For help regarding completion of this NOI please contact DEQ, Small Business/Small Community Assistance at 1-800-259-2890.

ATTENTION: ANY INFORMATION SUBMITTED TO LDEQ MAY BECOME PUBLIC RECORD IN ACCORDANCE WITH ACT 256 RLS 2019

Date Prepared _____

Please check:

- Initial Permit
- Existing Facility
- Proposed/New Facility
- Modified Coverage

Agency Interest No. AI _____

NPDES/LPDES Permit No. LA _____

STATE OF LOUISIANA
DEPARTMENT OF ENVIRONMENTAL QUALITY
Office of Environmental Services, Water Permits Division
Post Office Box 4313
Baton Rouge, LA 70821-4313
PHONE#: (225) 219-3590

**LPDES NOTICE OF INTENT TO DISCHARGE WASTEWATER
FROM AUTOMOTIVE DEALERSHIPS, PAINT AND BODY SHOPS, AUTOMOTIVE
REPAIR FACILITIES, MOTORCYCLE DEALERSHIPS, AND RECREATIONAL
VEHICLE DEALERSHIPS**

(Attach additional pages if necessary.)

SECTION I - FACILITY INFORMATION

A. Permit is to be issued to the following: (must have operational control over the facility operations - see LAC 33:IX.2501.B and LAC 33:IX.2503.A and B).

1. Legal Name of Applicant (Company, Partnership, Corporation, etc.) _____

Facility Name _____

Mailing Address _____

Zip Code: _____

If applicant named above is not also the owner, state owner name, phone # and address.

Please check status: Federal Parish Municipal
 State Public Private Other: _____

2. Location of facility. Please provide a specific street, road, highway, interstate, and/or River Mile/Bank location of the facility for which the NOI is being submitted.

City _____ Zip Code: _____ Parish _____

Front Gate Coordinates:

Latitude- ____ deg. ____ min. ____ sec. Longitude- ____ deg. ____ min. ____ sec.

Method of Coordinate Determination: _____

(Quad Map, Previous Permit, website, GPS)

Is the facility located on Indian Lands? Yes No

SECTION I - FACILITY INFORMATION (cont.)

3. Name & Title of Contact Person at Facility _____
Phone _____ Fax _____ e-mail _____

B. Name and address of responsible representative who completed the NOI:

Name & Title _____
Company _____
Phone _____ Fax _____ e-mail _____
Address _____

C. Name and address of responsible water billing party (invoices will be mailed to this address):

Name & Title _____
Company _____
Phone _____ Fax _____ e-mail _____
Address _____

D. Discharges Requiring Approval from the Division of Historic Preservation:

If this NOI is being completed for a facility that has not yet been constructed, you should contact the *Section 106 Review Coordinator in the Office of Cultural Development, Archaeology Division (P. O. Box 44247, Baton Rouge, LA 70804-4247 or telephone (225) 342-8170 or (225) 342-8200)* to determine if construction activities or the proposed discharges will adversely affect properties listed or eligible for listing in the National Register of Historic Places

- This is an existing facility and no construction activities related to this NOI are proposed.
- This is a new facility and construction activities were completed prior to the submission of this NOI form.
- This is a proposed facility and construction activities are not yet complete but I have obtained approval from the State Historic Preservation Officer for the proposed construction activities. (Submit a copy of the approval letter with your NOI.)

E. Facility Type (check all that apply):

- Automotive Dealership (SIC 5511 and 5521)
- Dealerships that sell tractor-trailer rigs
- Paint and body shop (SIC 7532)
- Motorcycle Dealership (SIC 5571)
- Recreational Vehicle Dealership (SIC 5561)
- Automotive Repair and Maintenance Shop (not limited by SIC code)
- Automotive Exhaust System Repair Shop (SIC 7533)
- Automotive Transmission Repair Shop (SIC 7537)
- General Automotive Repair Shop (SIC 7538 and 7539)
- Other: _____

SIC:

SIC codes can be obtained from the U. S. Department of Labor internet site at <https://www.osha.gov/pls/imis/sicsearch.html>

SECTION II – DISCHARGE INFORMATION

A. Miscellaneous Discharges

Are there any discharges of hydrostatic test wastewaters, once-through non-contact cooling water, cooling tower blowdown wastewater, etc... to waters of the state?

Yes No

If you answered YES, you are not eligible for coverage under General Permit LAG470000. Please contact the Water Permits Division at (225) 219-3590 to determine appropriate permit coverage.

B. Sanitary Wastewater

Does this facility discharge sanitary wastewater to waters of the state? Yes No

If YES, the total daily average flow in gallons per day (gpd) from the sanitary wastewater treatment system must be less than 5,000 gpd in order to be eligible for coverage under General Permit LAG470000.

C. Discharge Information

An Outfall is the point at which wastewater is monitored prior to mixing with other waters. An outfall can be identified either at the point that effluent discharges by pipe from a treatment plant or treatment system or the point at which effluent discharges into a roadside ditch, into a storm drain, or directly into a receiving water body such as a creek, coulee, bayou, canal or river. An internal outfall is an outfall for a waste stream that combines with other waste stream(s) before discharging into an external outfall. You should read **Section B – Effluent Limitations** of the permit before completing this section of the NOI. You should place an “X” in the column next to any of the outfall numbers for all types of discharges that occur at your facility. The outfall numbers listed below correspond to the outfall numbers listed in the permit, which are the only types of discharges that are permissible under the general permit. If more than one outfall of a particular type occurs at a facility, then each separate outfall point should be clearly identified as Outfall 01A, Outfall 01B, Outfall 01C, or Outfall 02A, Outfall 02B, Outfall 02C, etc.

Facility Discharge ¹	Outfall No ²	Outfall Description	Outfall Location ³ (complete this column for each outfall that occurs at your facility)	Treatment ⁴
	Outfall 001	Treated Washrack Wastewater		
	Outfall 002	Maintenance and Shop floor Washwater		
	Outfall 003	Paint Booth Washdown and Wet Sanding Wastewater		
	Outfall 004	Potentially Contaminated Stormwater ⁵		
	Outfall 005	Treated Sanitary Wastewater (less than 5,000 gpd)		

Facility Discharge ¹	Outfall No ²	Outfall Description	Outfall Location ³ (complete this column for each outfall that occurs at your facility)	Treatment ⁴
	Outfall 006	Commingled Washrack and Sanitary Wastewater (less than 5,000 gpd)		

¹Place an "X" in the appropriate box(es) in this column for all outfalls that will occur at the permitted site.

²Outfall 001, 002, 003, 004, and/or 005 should be used if you have only one outfall of this type of wastewater and/or storm water. Outfall 01A, 01B, 02A, 02B, etc., should be used in instances where you have more than one outfall of that type of wastewater and/or storm water. If you have three or more outfalls of any listed wastewater and/or storm water you should write in the appropriate Outfall No. (Outfall 01C, 01D, 02C, 02D, etc.) in one of the blank columns and fill in the outfall location for that discharge.

³This should be the point at which a sample of the discharge will be collected. Examples of outfall locations could be (but are not limited to): at the point of discharge from the settling basin located at the northeast corner of the facility; at the point of discharge from the washrack; at the southwest corner of the facility; or at the point of discharge from the STP located near the office building.

⁴List any treatment that is utilized prior to discharge. Write "None" if wastewater is not treated prior to discharge.

⁵Most facilities applying for coverage under this general permit operate under a SIC code that does not require stormwater coverage according to current regulations. Unless specifically notified otherwise by LDEQ, applicants should not apply for permit coverage for stormwater discharges from their facility.

SECTION II – DISCHARGE INFORMATION (cont.)

D. Receiving Waters

Indicate how the wastewater reaches state waters (named water bodies). This will usually be either *directly*, by *open ditch* (if it is a highway ditch, indicate the highway), or by *pipe*. You should specifically name all of the minor water bodies that your wastewater will travel through on the way to a major water body. This information can be obtained from U.S.G.S. Quadrangle Maps (See Section III). Include river mile of discharge point if available. If a waterbody is unnamed, identify it as unnamed.

Complete the discharge route and receiving stream information for all the outfalls at your facility. If all the outfalls discharge by the same route (i.e., open ditch) and into the same receiving stream, then you need only complete the first **Outfall Number(s)** section, however, you should list all the outfall numbers that you identified on pages 4-6 of this form. If different outfalls discharge by different routes or into different receiving streams then complete as many of the **Outfall Number(s)** sections as necessary to properly characterize all outfalls. If you need additional space, please attach a separate sheet using the same format to supply the additional discharge route and receiving stream information for other outfalls.

Outfall Number(s) Applicable: _____

By _____ (effluent pipe, ditch, etc.);
thence into _____ (Parish drainage ditch, canal, etc.);
thence into _____ (named bayou, creek, stream, etc.);
thence into _____ (river, lake, etc.).

Outfall Number(s) Applicable: _____

By _____ (effluent pipe, ditch, etc.);
thence into _____ (Parish drainage ditch, canal, etc.);
thence into _____ (named bayou, creek, stream, etc.);
thence into _____ (river, lake, etc.).

Outfall Number(s) Applicable: _____

By _____ (effluent pipe, ditch, etc.);
thence into _____ (Parish drainage ditch, canal, etc.);
thence into _____ (named bayou, creek, stream, etc.);
thence into _____ (river, lake, etc.).

SECTION III – MAPS/DIAGRAMS

- A. Site Diagram.** Attach to this NOI a complete site diagram of your facility showing the boundaries of your facility, the location of all building and/or storage areas, the location of any treatment units (such as settling basins, wash racks, sewage treatment plants), and demonstrate how the wastewater flows through your facility into each clearly labeled discharge point. Indicate stormwater flow pattern on this diagram or provide additional diagrams if needed. Indicate the location of the front gate or entrance to the facility on the site diagram. The diagram need not be to scale.
- B. Topographic Map.** Attach to this NOI a map or a copy of a section of the map which has been **highlighted to show the path of your wastewater from your facility to the first named water body. The highlighted map must be attached to BOTH NOIs that are submitted to LDEQ (i.e., the original NOI and the copy of the NOI).** Include on the map the area extending at least one mile beyond your property boundaries. Indicate the outline of the facility, the location of each of its existing and proposed discharge structures, and any existing hazardous waste treatment storage or disposal facilities. Waterways and streets/highways must be clearly identified by name on the map.

A U.S.G.S. 1:24,000 scale map (7.5' Quadrangle) would be appropriate for this item. Appropriate maps can be obtained from local government agencies such as DOTD or the Office of Public Works. Maps can also be obtained online at <http://map.deq.state.la.us/> or www.trails.com (formerly TopoZone). Private map companies can also supply you with these maps. If you cannot locate a map through these sources you can contact the Louisiana Department of Transportation and Development at:

1201 Capitol Access Road
Baton Rouge, LA 70802
(225) 379-1107
maps@dotd.louisiana.gov

- C. Flow Diagram.** Attach a line drawing of the water flow through the facility with a water balance showing operations contributing wastewater to the effluent and treatment units. The water balance must show average and maximum flows at intake and discharge points and between units, including treatment units. If a water balance cannot be determined, the applicant may provide instead a pictorial description of the nature and amount of any sources of water and any collection and treatment measures. Hand drawn maps are acceptable.

SECTION IV – COMPLIANCE HISTORY

Attach a history of all violations and enforcement actions for the facility, a summary of all permit excursions including effluent violations reported on the facility's Discharge Monitoring Reports (DMRs), and bypasses for the last three years. Using a brief summary, report on the current status of all administrative orders, compliance orders, notices of violation, cease and desist orders, and any other enforcement actions either already resolved within the past 3 years or currently pending. The state administrative authority may choose, at its discretion, to require a more in-depth report of violations and compliance actions for the applicant covering any law, permit, or order concerning pollution at this or any other facility owned or operated by the applicant.

If this facility has been inspected by the LDEQ within the past three years, please provide the inspection date.

SECTION V – LAC 33.I.1701 REQUIREMENTS

- A.** Does the company or owner have federal or state environmental permits in other states that are identical to, or of a similar nature to, the permit for which you are applying? (This requirement applies to all individuals, partnerships, corporations, or other entities who own a controlling interest of 50% or more in your company, or who participate in the environmental management of the facility for an entity applying for the permit or an ownership interest in the permit.)
- Permits in Louisiana. List Permit Numbers: _____
- Permits in other states (list states): _____
- No other environmental permits.
- B.** Do you owe any outstanding fees or final penalties to the Department? Yes No
If yes, please explain.
-
- C.** Is your company a corporation or limited liability company? Yes No
If yes, is the corporation or LLC registered with the Secretary of State? Yes No

SECTION VI – SITE HISTORY

- A.** Date operations began at this site: _____
- B.** Is the current operator the original operator? Yes No
If **no**, give a reverse chronological list of previous operators. Include the company name and telephone number (if available), and the dates through which the company operated this facility.

Company	Dates of Operation		Telephone Number
	From	To	

SECTION VII – SIGNATURE

According to the Louisiana Water Quality Regulations, LAC 33:IX.2503, the following requirements shall apply to the signatory page in this application:

Chapter 25. Permit Application and Special LPDES Program Requirements

2503. Signatories to permit applications and reports

- A. All permit applications shall be signed as follows:
1. For a corporation - by a responsible corporate officer. For the purpose of this Section responsible corporate officer means:
 - (a) A president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or
 - (b) The manager of one or more manufacturing, production, or operating facilities provided: the manager is authorized to make management decisions that govern the operation of the regulated facility, including having the explicit or implicit duty of making major capital investment recommendations and initiating and directing other comprehensive measures to ensure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken together complete and accurate information for permit application requirements; and the authority to sign documents has been assigned or delegated to the manager in accordance with corporation procedures.
 2. For a partnership or sole proprietorship - by a general partner or the proprietor, respectively; or
 3. For a municipality, state, federal or other public agency – by either a principal executive officer or ranking elected official. For the purposes of this section a principal executive officer of a federal agency includes:
 - (a) The chief executive officer of the agency, or
 - (b) A senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrators of EPA).
- ...
- D. Any person signing any document under Permit **Standard Conditions, Section D.10.a. or b** shall make the following certification:

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations."

SIGNATORY AND AUTHORIZATION

Pursuant to the Water Quality Regulations (specifically LAC 33:IX.2503.A and B), which became effective October 20, 1995, the state NOI must be signed by a responsible individual as described in LAC 33:IX.2503.A and B and that person shall make the following certification:

"I certify under penalty of law that I have read and understand the Section A "Applicability" requirements for coverage under the general permit for automotive dealerships, paint and body shops, automotive repair facilities, motorcycle dealerships, and recreational vehicle dealerships. To the best of my knowledge, my facility is eligible for coverage under this general permit and its operation will not result in a discharge of pollutants from sources not covered by the general permit, or otherwise authorized by another individual or general permit."

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations."

Signature _____
Printed Name _____
Title _____
Company _____
Date _____
Telephone _____
e-mail _____
Federal Tax ID _____

CHECKLIST

To prevent any unnecessary delay in the processing of your notice of intent to be covered under the general permit, please take a moment and check to be certain that the following items have been addressed and enclosed:

1. ALL questions and requested information have been answered (N/A if the question or information was not applicable).
2. ALL required maps, drawings, and other reports are enclosed.
3. The appropriate person has signed the signatory page.
4. Please forward the original and one copy of this NOI and all attachments.

ANY NOI THAT DOES NOT CONTAIN ALL OF THE REQUIRED INFORMATION WILL BE CONSIDERED INCOMPLETE. NOI PROCESSING WILL NOT PROCEED UNTIL ALL REQUESTED INFORMATION HAS BEEN SUBMITTED.

NOTE: UPON RECEIPT AND SUBSEQUENT REVIEW OF THE NOI BY THE PERMITS DIVISION, YOU MAY BE REQUESTED TO FURNISH ADDITIONAL INFORMATION IN OTHER TO COMPLETE THE PROCESSING OF THE PERMIT.